



CRS Parent Connection

Alabama Department of Rehabilitation Services



Volume 15, Number 2

Spring 2007

State PAC Meets in February

The State Parent Advisory Committee (SPAC) and the Youth Advisory Committee (YAC) met jointly on Saturday, February 17, 2007 in Montgomery. Commissioner Steve Shivers shared information about activities happening in our state that the department is a part of, including emergency preparedness planning, the Medicaid Infrastructure grant, the Governor's Task Force on Strengthening Families, among others. He also explained the budget request that ADRS has sent to the legislature and asked for families to support CRS and ADRS throughout the upcoming session. Assistant Commissioner for CRS, Melinda Davis, gave updates to the program, including the addition of the \$50 co-pay category for covered services.

After lunch the YAC moved to a separate room to complete their meeting, including providing their perspective on the CRS activities to be included in the upcoming Block Grant report.



Commissioner Shivers speaks to the SPAC



Representatives from the local PACs discuss family needs and CRS programs

Linda Collins, CRS parent consultant in Andalusia, shares what is going on in her local PAC



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CRS Parent Connection

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Parent Connection is a complimentary newsletter published by Children's Rehabilitation Service for families of children with special health care needs. The goal of this newsletter is to increase communication and share information about children with special health care needs and their families. The newsletter reflects a family-centered theme throughout and serves as a forum for family members to share information, thoughts, feelings, concerns, etc. Nothing printed or implied in this publication constitutes an endorsement by the Alabama Department of Rehabilitation Services.

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From the Director's Chair



Once again, it's spring!! Beautiful flowers are blooming in all colors, trees barren in the winter now have green leaves and birds are chirping early in the mornings. Just as winter turns to spring, the Alabama Legislature moves full speed into the legislative session. Although the budget process is sometimes a little bumpy, at this point we are extremely pleased that the governor's budget included every penny that Commissioner Steve Shivers requested for programs within our agency, the Alabama Department of Rehabilitation Services (ADRS), for Fiscal Year 2008 (FY'08). A total of \$43.8 million was requested for the Vocational Rehabilitation (VR), Homebound/Independent Living, Early Intervention (EI) and Children's Rehabilitation Service (CRS). We are counting on you to support us in getting this budget passed as it moves through the House of Representatives and the Senate. As you have opportunities, please educate and inform the public and our legislators about our agency and programs.

To assist you with this effort, I am providing you with "talking points" which were prepared by our governmental relations manager.

The Vocational Rehabilitation program is requesting an amount necessary to bring down available federal matching funds. Every \$1 in state funds is used to bring down nearly \$4 in federal funds. Our VR program served more than 47,300 adolescents and adults with disabilities in FY'06, and one-third were students. The Homebound/Independent Living program request will allow that program to serve 250 more people who sustain spinal cord or traumatic brain injuries. It will assist in moving individuals with severe disabilities from nursing homes into their own homes and will help meet the increasing costs of service delivery. The Homebound program works to enhance the quality of life for individuals with catastrophic disabilities by enabling them to live and maintain their independence in their own homes.

As many of you know, Early Intervention, which serves infants and children birth to 3 years old with developmental delay, was created by the federal government to be the first step to ensuring that all children start school ready to learn. This year, EI faces a critical funding need and is the primary focus of our agency's FY'08 budget request. The cost of specialized services has increased over the years and recent state appropriations have not kept pace with the demand for EI services. If EI does not receive increased funding for FY08, funds will not be available to enroll all of the children in need of services.

Last year (FY'07) Children's Rehabilitation Service, which serves children and youth with special health care needs age birth to 21, received \$600,000 less than requested. This year's budget request includes that shortfall, increases for operational costs and increased costs related to specialized medical needs. Our legislators and the public may be interested in knowing the following facts:

- In 2006, Children's Rehabilitation provided services to more than 11,000 children and their families, including 1,800 newly enrolled children.
- CRS staff (including care coordinators, nurses, social workers, audiologists, nutritionists, and physical therapists) made some 2,351 visits to local school systems, career tech/vocational schools, community colleges and universities.
- CRS provided expanded services to 400 children with traumatic brain injury.
- CRS provided hearing services to nearly 450 infants and school-aged children identified through the state's newborn hearing screening program or by hearing concerns detected in the classroom.

(Continued on page 10)

Telling the Teacher: What I Want my Child's Classroom Teacher to Know

Most children with disabilities are included in the “regular” classroom for part of their day. Yet many general classroom teachers say that sometimes they feel unprepared and uncertain about how to work with students who have special needs. Many add that they would welcome ideas.

“We parents do understand that teachers are incredibly busy with large numbers of students, lack of resources and other challenges,” said Beth Davis, the New Brighton mother of two teenagers with disabilities.

“I’ve always encouraged both of my children’s teachers—yes, even all the ones in high school—to contact me if I can help them understand anything at all about either one of my children,” she continued.

Like Davis, many parents of children with disabilities are willing to help teachers and others at school work with their child. Some families, however, don’t offer help or suggestions because 1) they believe that the teacher must know best, or 2) they don’t want to appear critical of the teacher.

Past issues of PACESETTER have printed articles on what teachers suggest to parents as they send their children with disabilities to school. Parents now offer their suggestions for classroom teachers. In the spirit of parent-school partnerships, you may wish to share the following ideas at your child’s school.

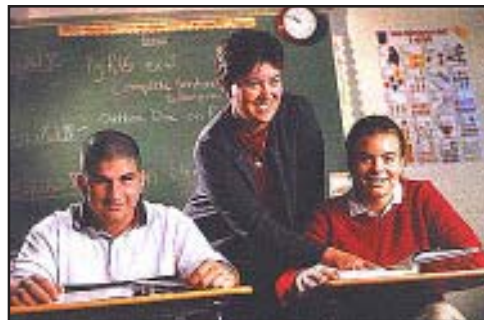
My child is a person

- Greeting my child by name when he comes to class can make a huge difference in his day. Developing a relationship with him establishes his existence. You set the stage for how others at school treat him.

- Like any child, mine is unique. She has passions, dislikes, things she is good at, things she is not. Your efforts to learn about her interests and strengths validate her.
- My son’s identity is more than a diagnosis or a label on an Individualized Education Program (IEP). The disability is only part of who he is. Please look beyond it to see more of him.
- Understanding the disability may affect how you perceive my daughter. I’m happy to give or help you find information.
- Please be discreet. What you say about my son—good or bad, in the teacher’s lounge or elsewhere—affects his reputation, as well as your own.

We can talk

- I gladly will share ideas and thoughts, as well as concerns, about my child. If you contact me, I can probably offer insight to her behavior and share strategies that work at home.
- My son may look like a typical 12 year old, but his disability is real. Our family worked with professionals through a long and sometimes painful process to reach a diagnosis for him. If you acknowledge that my son has a disability, we can communicate openly about how to address it.
- The only way my daughter can succeed at school is through our partnership. I know that you are a professional, but I am an expert when it comes to my child, and I will be part of her life forever.



Many classroom teachers welcome and appreciate information from parents that will help children with disabilities succeed in school.

My child can learn

- You can relax. I don’t expect miracles, but I hope you will have high expectations for my son. I assume he can do a certain task until he proves otherwise. If we work together, our expectations for him likely will be realistic.
- Arranging groups and teams to include everyone will help my daughter feel that she belongs to the class and the school community. She learns from peers.
- My child’s experiences in your classroom are the foundation of his future success at school or in employment. Encouragement is crucial for him to keep trying.
- My son may not be able to express himself in customary ways, but he benefits from being in your class. He gains knowledge, even if he is slow at a task, scores low on tests or does not respond at all. His IEP, which you have received, tells what accommodations he needs to progress.

(Continued on page 4)

April is Occupational Therapy Month!

WHAT is Occupational Therapy?

Occupational therapy (OT) is therapy based on performing the meaningful activities of daily life such as bathing, cooking, dressing, eating, going to school, playing, working, or socializing with friends. OTs help people learn or re-learn how to do these activities in spite of a disability or special need. OT is for people of all ages—to improve skills that help them with these daily activities at home, at school, at work, and at play.

WHO are Occupational Therapists?

OTs are skilled professionals. Their education includes the study of human growth and development, with special emphasis on the social, emotional and physical effects of illness and injury. They help people with illnesses, injuries, or disabilities get on with the “job” of living (that’s where the name “occupational” comes from!).

HOW are Occupational Therapists different from doctors or other therapists?

OTs look at the whole picture when it comes to a person’s treatment—the person’s abilities, the activities they need and want to do, and where they do those activities. For example, in a healthcare team, a surgeon might

operate on your injured knee. A physical therapist might give you exercises to help your knee heal with as much strength and motion as possible. But an occupational therapist will ask, “What do you **need** your knee to do? What activities do you want to do and where do you need to do them? That way, the OT can help you change or adapt the way you do these activities so you can still do them even if you have any limitations from your injured knee.

HOW do Occupational Therapists work with children?

About one-third of OTs work in early intervention programs, schools, rehabilitation centers, and children’s hospitals helping millions of children. OTs help children facing physical, cognitive, or mental health challenges that can affect how well they do in school, how they play with friends, how they learn to be independent, and what they plan to do in the future. OT assessments and treatments focus on certain areas including:



- Activities of daily living (caring for self-needs such as eating, dressing, and toilet habits)
- Education (achieving in the learning environment)
- Play (interacting with age-appropriate toys, games, equipment and activities)
- Social participation (developing appropriate relationships and behaviors that don’t interfere with learning or social relationships)
- Work (developing interests and skills needed for transition to community life after school.)

WHERE can I go for more information?

OTs are trained in helping people of all ages with a broad range of issues that can impact their daily lives. OTs can help people participate more fully in the “occupation” of living. For more information, please visit the American Occupational Therapy Association website, www.aota.org. If you think you or your child might benefit from occupational therapy, please ask your doctor, your child’s doctor, or your child’s teacher.

Julie Preskitt
MCH/OT Program Specialist, CRS

(Telling the Teacher continued from page 3)

- My child probably can develop her abilities—if we encourage her. It may be easy to coddle her, but together we need to help her “fly” on her own.
- Try using code words or discreet signals to guide my daughter. Calling out her name in class for what her disability

will not allow her to do (“Mary, sit down,” Mary be quiet,” or “Mary, hurry up”) brings negative attention and affects her self esteem.

My child has gifts

- Children with all types of disabilities can offer much to others. If you look for it, my son can contribute something

valuable to the classroom that no one else can.

- Above all, I hope you can find something to genuinely like about my child. I know you will.

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Reauthorize SCHIP for Families of Children and Youth with Special Health Care Needs

The State Children's Health Insurance Program (SCHIP) provides a critical layer of America's safety net for children and youth. It offers health insurance to families who are at higher income levels necessary for eligibility in the Medicaid program. This year, Congress must reauthorize this program.

If fully funded and improved, SCHIP has the potential, along with Medicaid, to cover roughly 75 percent of the 9 million children in this country who are uninsured. To make this happen, Congress needs to allocate \$60 billion in new federal funds over the next five years.

Family Voices is encouraging you to write or email your congressional delegation and request that they fully fund and improve SCHIP during the reauthorization process. To find the names and contacts for your congressional

representatives, go to the Family Voices website at www.familyvoices.org. Click on the Legislative Action Center button and navigate to Issues and Legislation. When you enter your zip code you will see the contacts for your area. Also, the website offers suggestions of information to include in your correspondence.

The Legislative Action Center, funded solely by private dollars, allows you to make your voice heard about health issues concerning your children and keeps you updated on current legislation.

For information about Family Voices, please contact the Alabama state coordinators, Susan Colburn (334) 613-2884, scolburn@rehab.al.gov or Jerry Oveson (251) 438-1609, oveson@bellsouth.net.

Transition Awareness Month for Individuals with Disabilities



Governor Bob Riley signed a proclamation February 2, 2007, urging all residents of Alabama to support programs that enhance the dignity, participation and independence of students with disabilities. In so doing, he proclaimed March as Transition Awareness Month for Individuals with Disabilities. Attending

the Proclamation signing were members of a youth advisory panel, "Young Adults In Transition (YAIT)"; representatives from the State Department of Education, Special Education Division; Alabama Department of Rehabilitation Services; Alabama Department of Mental Health

and Mental Retardation; and Auburn University.

This proclamation is a long-standing tradition of Alabama's governors in support of the annual Transition Conference and the strong transition partnerships we have in Alabama. This year's conference was the seventeenth and was cosponsored by the partner agencies present at the signing.

Transition initiatives which enhance the movement of students with disabilities from high school to post-school activities have long been a focus in Alabama. The strong collaborative efforts of the groups mentioned above have brought national attention to Alabama. This year marks renewed commitment to improve existing programs and develop programs to address unmet needs.

Linda Hames
ADRS State Transition Coordinator



Ready, Set Go!

The U.S. Department of Homeland Security (DHS) on their website www.ready.gov encourages all Americans to prepare an emergency kit with items needed for basic survival, make a family emergency plan, and be informed about the types of emergencies that can happen

and their appropriate responses. The website includes the following things to consider for people with disabilities when gathering a kit, making plans and identifying special information they will need.

- Create a support network to help in an emergency.
- Tell these people where you keep your emergency supplies.
- Give one member of your support network a key to your house or apartment.
- Contact your city or county government's emergency information management office. Many local offices keep lists of people with disabilities so they can be located quickly in a sudden emergency.
- Wear medical alert tags or bracelets to help identify your disability.
- If you are dependent on dialysis or other life sustaining treatment, know the location and availability of more than one facility.

- Show others how to operate your wheelchair.
- Know the size and weight of your wheelchair, in addition to whether or not it is collapsible, in case it has to be transported.
- Additional supplies for people with disabilities:
 - ✓ Prescription medicines— list of medications including dosage, list of any allergies.
 - ✓ Extra eyeglasses and hearing-aid batteries.
 - ✓ Extra wheelchair batteries, oxygen.
 - ✓ Keep a list of the style and serial number of medical devices.
 - ✓ Medical insurance and Medicare cards.
 - ✓ List of doctors, relatives or friends who should be notified if you are hurt.

For more information about being prepared and to download the brochure "Preparing Makes Sense for People with Disabilities and Special Needs," see the Ready website at www.ready.gov.

Susan Colburn and Julie Preskitt of Children's Rehabilitation Service have prepared a checklist of information that can be attached to a freezer bag, filled with the listed items and stored in the freezer at home. In case of an emergency, some basic information and documents would be quick to grab and go. The freezer bag label is included below for your use.

Family Emergency Information

- ☐ AAP Emergency Information Form (found at www.aap.org)
- ☐ Copies of Health Insurance Cards, Including Medicaid (*front & back)
- ☐ List of All Equipment Used by Your Child, Including Make and Model #s
- ☐ List of All Medications Taken by Your Child
- ☐ Daily Routine/Schedule
- ☐ Diet Restrictions
- ☐ Map of Alabama
- ☐ Other Important Family Papers (*social security cards, wills, bank account numbers, credit card numbers, household inventory, family records*)



EPI Emergency Patient Information

What is EPI?

EPI is a free service provided by Blue Cross and Blue Shield of Alabama. EPI allows you to store emergency contact and medical information online and make it available to rescuers in emergencies.

How does EPI work?

EPI provides each participant with a unique 10-character Rescue Login which is displayed on their EPI identification card. The information recorded in EPI can be viewed by going to www.myepi.net, entering the Rescue Login in the space provided, and clicking “Go.”

Can rescuers see my information without knowing my Rescue Login?

No. Your information can only be accessed by entering your Rescue Login

in the space provided at www.myepi.net. That’s why it is important to keep your EPI identification card with you at all times.

Why is EPI a free service?

EPI is provided as a public service and there is no charge for participation. EPI is available to all Alabamians, regardless of insurance coverage. Residents of other states are eligible to register for EPI if they are insured by Blue Cross and Blue Shield of Alabama.

How do I register for EPI?

- Go to www.myepi.net
- Select “New User Registration”
- Complete the information as indicated and create your secure User ID and password

- Enter information in each category that applies to you, clicking “Save and Continue” at the bottom of each section
- Print your EPI summary and an EPI identification card for your immediate use
- Order a permanent EPI card

How do I get my permanent EPI card?

After you have completed your registration in EPI, select “EPI Identification Card” from the links on the left side of the page. Please confirm that your name and mailing address are correct, and then click “Submit.” Your permanent EPI card will be sent by mail.

Preventing Heat-Related Illness

As we approach the summer months, days of extremely high temperatures are very likely. The body normally cools



itself by increasing blood flow to the skin and perspiring. Heat-related illness occurs

when the body’s temperature control system becomes overloaded. When this happens, perspiring may not be enough. High levels of humidity can make it even harder for the body to cool itself. A warning sign of heat stroke is skin that appears hot, dry and red in color.

Other warning signs are confusion, hallucinations and aggression.

During excessive heat events, the following prevention strategies can help prevent heat stroke:

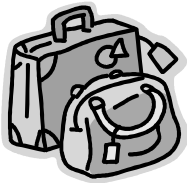
- Visit air-conditioned buildings in your community if your home is not air-conditioned. These may include: senior centers, movie theaters, libraries, shopping malls or designated “cooling centers. Even a few hours a day in air conditioning can greatly reduce the risk.
- Take a cool shower or bath.
- Drink lots of fluids. Don’t wait until you are thirsty to drink. Avoid beverages containing caffeine, alcohol or large amounts of sugar. These drinks increase dehydration.
- Ask your doctor or other health care provider if the medications you take could increase your susceptibility to heat-related illness.
- Wear lightweight, light-colored and loose-fitting clothing.
- Visit at-risk individuals at least twice a day. Watch for signs of heat-related illness.

Your Child Traveling Alone

The teenage years bring many adventures including travel. Last summer our son, Joel, traveled with a youth choir from our church. In the past he had traveled with a medical mission team to Honduras. I had never been concerned that something would happen to him or our other two sons, Garrett and Ethan, when they traveled with groups such as this.

However, while on the choir mission trip to Washington D.C. our lives were hit with a crisis. I was very thankful that the medical information Joel had with him was all the chaperons needed for emergency care.

A booklet titled *About Our Family, A Respite Workbook for Families and Care-Providers*, published by The Child Neurology Foundation, had Joel's



medical history, list of medications, contact information for his primary care physician as well as his neurologist, and a copy of Joel's

insurance card. The most important part of the booklet is on the inside of the back cover, which is a Medical Release Form. Each one of my sons has this booklet with them when they travel or go to visit a friend.

A checklist of important things to carry when your child travels without you includes:

- copy of the blue slip from the doctor's office showing shot records
- copy of insurance and/or Medicaid card, front and back
- all your doctor names, addresses, phone and fax numbers
- list of all medications, dosage and times taken
- previous medical information, such as seizures, blood pressure or other important information to assist medical providers
- list any allergies that your child has with medications, insects, etc.
- list all your contact information like cell, home and work phone numbers, address and nearest neighbor
- a medical release signed and dated by guardians, may be notarized

Being prepared is essential for individuals with health care issues whether or not they are traveling, staying with a care-giver or visiting family and friends. Having this material in a folder could save precious time in providing medical care.



Joel Cobbs enjoys traveling with the youth choir and on mission trips with his church.

In route to Washington DC, we received regular updates as to what was being done for Joel. When I asked one of the physicians did they need anything to provide medical care for him, they responded that they had it in hand. You may ask, will I let Joel or my other sons travel again? The answer is yes. I encourage them to travel and be a part of activities with their school and church. However, I want them to be equipped to handle situations should I not be with them. This checklist provides that for them.

You may request the free booklet from The Child Neurology Foundation at (651) 645-4244 or on their website at www.childneurologyfoundation.org.

Rita F. Cobbs
CRS Parent Consultant, Huntsville

Camp ASCCA Summer 2007

Easter Seals Camp ASCCA is Alabama's Special Camp for Children and Adults. Camp ASCCA's goal is to serve those who can derive maximum benefit from the resident camp experience and provide a healthier, happier, longer, and more productive life for children and adults of all abilities. Each camp program is geared to the age, interest and ability of the campers. The application deadline for Summer 2007 is May 15, 2007. To see a complete list of camp schedules and to download an application, visit the website at www.campascca.org.





Let's YAC About It

On Saturday February 17, 2007 the Youth Advisory Committee (YAC) met in Montgomery. After sitting in on the State PAC meeting in the morning, the youth met together to discuss issues important to young adults. Susan Colburn shared coming events with the youth.



The YAC met with Kim McLaughlin for information concerning transition, and with Julie Preskitt to get a perspective on CRS activities pertaining to youth included in the upcoming Block Grant report.

The National Center on Secondary Education and Transition

The National Center on Secondary Education and Transition (NCSET) coordinates national resources, offers technical assistance and disseminates information related to secondary education and transition for youth with disabilities in order to create opportunities for youth to achieve successful futures. NCSET is headquartered at the Institute on Community Integration in the University of Minnesota's College of Education and Human Development.

From their website, www.ncset.org, you can navigate to many of the resources online such as:

- Youthhood.org: a dynamic, curriculum-based tool that can help young adults plan for life after high school
- National Standards & Quality Indicators: standards that indicate quality education and transition services for all youth
- IDEA 2004 (Individuals with Disabilities Education Improvement Act): a list of many resources related to IDEA of 2004



Mobile Ability Pageant a Big Hit



Madison Henderson proudly wears her winner's crown

On Monday, January 22, 2007, radio station 97.5 WABB in Mobile held the first annual Ability Pageant. This type of event had never been done on the Gulf Coast. The idea came from *Miss Ability*, a Dutch show that became the surprise hit of the year in the Netherlands. The Dutch Miss Ability has become an ambassador for disability rights.

WABB wanted to show that people with disabilities should not be considered pathetic or be patronized. Therefore, they decided to host their own Ability Pageant.

The pageant had three age categories. Contestants were judged in a favorite wear category and they also had the option to compete in a separate talent category. The response from the disability community was tremendous. The pageant room was completely packed with contestants, parents and fan clubs waving signs of support for their favorite contestant.

Congratulations to Madison Henderson and Payton Strickland, CRS clients, for winning in their age categories. Madison won in the 1-12 year old age group. She sang *Jesus Take The Wheel* for her talent. Payton Strickland won in the 13-20 year old age group.

She read an original poem as her talent. Both girls received numerous prizes and a savings bond. Several CRS clients participated in the pageant. It was open to boys as well as girls.

WABB has announced that they plan to continue the Ability Pageant. They did admit, however, that next year's pageant would require larger facilities.

Penny Strickland
CRS Parent Consultant, Mobile



Payton Strickland is congratulated by a friend

Disability Access Parking Decals

If you have a disability or you transport passengers with disabilities, you can apply for a special license plate or placard that entitles you to park in disability-access parking spaces. You must own or partially own the vehicle you wish to license if you want a license plate; otherwise, you'll need to get a placard, the portable plastic license to hang from the rearview mirror. The placards and license plates are subject to renewal every five years.



To receive a handicap parking permit, you or your legal guardian must complete an application for [Disability Access Parking Privileges](#). You can print the application online at www.dmv.org/al-alabama/disabled-drivers.php or at your [local driver's license office](#). These are also available from the parent consultant at your local CRS office. When your privileges expire, you will need to reapply by completing a [Recertification for Handicapped Parking Privileges](#). If you qualify for a long-term disability after your first application, you may recertify yourself by signing the certification at the bottom of the form in the recertification box.

(Director's Chair continued from page 2)

CRS appreciates Kim Wanous for his hard work in pulling together the budget summary used to provide you this information. Please continue to read your newspapers and watch television news to stay up to date on legislative activities. If you have questions about how things are going for the agency or about any other ways you might be able to assist, please contact the State Office at (334) 281-8780 or 1-800-846-3697 or contact your local CRS office.

CRS has many new initiatives underway and new staff to tell you about. I look forward to sharing that information with you in the next issue.

Melinda Davis
Assistant Commissioner

Bicycle Safety

Summer vacation will be here soon and with school out, our children will be more active outdoors. One favorite summer activity is bike riding. Riding bikes gives children plenty of exercise and fresh air but also makes them vulnerable to injury. Here are some tips for safer bicycle fun.

- Buy a bike that is the right size; oversized bikes are dangerous.
- Check your brakes before riding.
- Don't ride at night.
- Wear light or bright-colored clothing so that motorists can see you.
- Ride on the right-hand side of the street.
- Obey all traffic signs and signals.
- Avoid broken pavement, loose gravel and leaves—which can cause you to lose control of your bike.
- Wear a bike helmet—it is part of the gear. The helmet should be level on your head and the strap securely fastened.



SPRING

L	M	O	S	S	O	L	B	G	O	L	F	G	G	K
P	A	P	V	P	A	N	S	Y	N	N	N	W	T	E
F	U	N	Y	W	R	N	E	I	Z	I	I	D	B	F
U	G	N	I	H	S	I	F	B	T	S	F	B	L	B
P	S	O	A	D	C	H	N	N	T	N	S	O	O	U
S	H	O	W	E	R	Y	I	G	E	E	W	N	O	R
B	B	S	P	A	L	A	R	K	A	E	L	I	M	R
T	U	E	D	L	P	C	C	R	R	R	Y	O	C	S
U	D	I	I	W	A	I	P	S	E	G	D	N	I	N
T	S	L	A	R	H	N	B	H	P	H	R	E	B	V
H	A	F	E	C	U	T	T	E	L	R	C	A	N	H
C	L	O	L	I	N	H	U	S	E	O	O	N	S	S
H	X	X	B	Z	F	P	L	E	U	S	X	U	A	S
A	W	Z	A	N	V	M	I	E	Q	H	B	K	T	R
X	I	K	L	C	Q	R	P	G	G	Z	S	E	C	E



FIELD, FISHING, FLIES, FLOWERS, GARDEN, GEESE, GOLF, GRASS, GREENS,
HYACINTH, LETTUCE, LILAC, ONION, PAINTING, PANSY, PHLOX, PLANTS,
RADISH, RANCH, ROBIN, ROOFING, SHOWER, SPRING, SPROUT, TULIP, VIOLET



CRS Parent Connection

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Montgomery, AL 36116

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What's Ahead

- | | |
|----------------------|---|
| April 30, 2007 | Teen Transition Expo 2007; Trinity United Methodist Church; Opelika; Contact: Mandy Jennings 1-800-568-8428 |
| May 23-26, 2007 | Family Voices Conference; Washington, D.C.; for more information visit www.familyvoices.org |
| August 27-28, 2007 | Planning for Disasters for People with Disabilities; Sheraton Hotel; Birmingham; Contact: Natasha Ptomey, nptomey@ms.soph.uab.edu |
| August 31, 2007 | Success Teaching for Children with Spina Bifida; The Bradley Center at Children's Hospital; Birmingham; Contact: Betsy DeCesare, Betsy.DeCesare@chsys.org |
| August 20-22, 2007 | 9th Annual Alabama Association for Persons in Supported Employment (APSE) Conference; Riverview Plaza Hotel; Mobile; Contact: Byron White, byron.white@rehab.alabama.gov |
| October 3-5, 2007 | Respite Conference, "Help is on the Way;" Embassy Suites Hotel; Huntsville; Contact: Linda Lamberth, alabamarespite@aol.com |
| November 14-16, 2007 | Early Intervention Conference; Sheraton Hotel; Birmingham; Contact: Jeri Jackson, JBH50@aol.com |
| Local PAC Meetings: | Check your local CRS office for dates and times of meetings in your area. |

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